

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000102238

**FILED**  
**Apr 02, 2006**  
**Secretary of State**

**Entity Name:** NICOLE A. FRIEDMAN P.S.Y.D., P.A.

**Current Principal Place of Business:**

110 E. BROWARD BLVD.  
STE 1700  
FORT LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4097  
DEERFIELD BCH, FL 33442

**New Mailing Address:**

110 E. BROWARD BLVD.  
1700  
FORT LAUDERDALE, FL 33067

**FEI Number:** 65-1149838

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FRIEDMAN, NICOLE A  
P.O. BOX 4097  
DEERFIELD BCH, FL 33442 US

**Name and Address of New Registered Agent:**

FRIEDMAN, NICOLE A  
110 E. BROWARD BLVD  
1700  
FORT LAUDERDALE, FL 33067 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

04/02/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: FRIEDMAN, NICOLE A  
Address: PO BOX 4097  
City-St-Zip: DEERFIELD BCH, FL 33442

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: FRIEDMAN, NICOLE A  
Address: 110 E. BROWARD BLVD, SUITE 1700  
City-St-Zip: FORT LAUDERDALE, FL 33067

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** NICOLE FRIEDMAN

DR

04/02/2006

Electronic Signature of Signing Officer or Director

Date